Complete if Known

PTO/SB/17 (11-01)
Approved for use through 10/31/2002. OMB 0651-0032
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TOF FY 2002 MAR 1 5 2002 Patient fees are subject to annual revision.				ation Nu	mber	09/610,132				
	FY 2002	Filing	Date		July 5, 2000					
MAR 1 5 2002 TOFFY 2002				Named In	ventor	Steve Cottis				
latter	e subject to annual revision.	_	iner Nam	•	P. Szekely					
Applicant Claims small entity status. See 37 CFR 1.27				Group / Art Unit 1714						
TOTAL AMOUNT OF PAYMENT (\$) 1100				Filing Date July 5, 2000 First Named Inventor Steve Cottis Examiner Name P. Szekely Group / Art Unit 1714 Attorney Docket No. AD 6573 US CIP						
TOTAL ANIO	(\$) :	Atton	Automory Docket No.							
ME	MENT (check all that apply)	_	FEE CALCULATION (continued)							
☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None				3. ADDITIONAL FEES Large Entity Small Entity						
Deposit Account:			Fee	Fee		Fee Eco Decembrion Fee				
			Code	(\$)		(\$) <u>Fair</u>	d			
Deposit Account	04-1928		105	130		65 Surcharge - late filing fee or oath				
Number 04-1320		127	50		25 Surcharge - late provisional filing fee or cover sheet.					
Deposit	E Lety De	ont de Nemours and Company	139	130	Ì	130 Non-English specification	'			
Account Name	E. I. au PC	ont de Nemours and Company	147	2,520		,520 For filing a request for reexamination				
	r is authorized	to: (check all that apply)	112	920*	112 9	220° Requesting publication of SIR prior to Examiner action				
☐ Charge fee(s) indicated below ☐ Credit any overpayments ☐ Charge any additional fee(s) during the pendency of this application				1,840*	113 1,	,840* Requesting publication of SIR after Examiner action				
Charge fee(s) indicated below, except for the filing fee to the				110	215	55 Extension for reply within first month	_			
above-identified			116	400		200 Extension for reply within second month	_			
	EEE	CALCULATION	117	920		460 Extension for reply within third month 920	_			
		CALCOLATION	118	1,440		720 Extension for reply within fourth month	—			
	LING FEE		128	1,960		980 Extension for reply within fifth month	\dashv			
	Small Entity		119	320		160 Notice of Appeal	_			
	Fee Fee ode (\$)	Fee Description Fee Paid	120	320		160 Filing a brief in support of an appeal				
	201 370		121	280	221 1	140 Request for oral hearing				
	206 165	Utility filing fee Design filing fee	138	1,510		,510 Petition to institute a public use proceeding				
	207 255	Plant filing fee	140	110		55 Petition to revive – unavoidable	_			
108 740 2	208 370	Reissue filing fee	141	1,280		640 Petition to revive – unintentional				
114 160 2	214 80	Provisional filling fee	142	1,280		640 Utility issue fee (or reissue)				
			143	460		230 Design issue fee	_			
		SUBTOTAL (1) (\$) 0	144	620		310 Plant issue fee				
			122	130		130 Petitions to the Commissioner	_			
2. EXTRA CLAIN	IFEES	Extra Fee from Fee	123	50	123	50 Processing fee under 37 CFR 1.17(q)	\dashv			
Total Claims	-20	Claims below Paid = 0 X 18 = 0	126	180	126 1	180 Submission of Information Disclosure Stmt	_			
Independent	_	= 0 X 84 = 0	581	40	581	40 Recording each patent assignment per property (times number of properties)				
Claims Multiple			146	740	246 3	370 Filing a submission after final rejection (37 CFR § 1.129(a))				
Dependent L	<u>ار در در</u>	X 280 = 0	149	740	249 3	For each additional invention to be examined (37 CFR § 1.129(b))				
Large Entity Fee Fee	Small Entity		179	740	279 3	370 Request for Continued Examination (RCE)	\neg			
Code (\$)	Code (\$)	169	900	169	900 Request for expedited examination of a				
103 18		9 Claims in excess of 20	1		1	design application	_			
102 84		Independent claims in excess of 3	1.			<i>i</i>				
104 280	204 14	40 Multiple dependent claim, if not paid	Other	fee (spec	cify)					
109 84	209 4	** Reissue independent claims over original patent	i							
110 18	210	9 ** Reissue claims in excess of 20 and over original patent								
1			1							

SUBMITTED BY Complete (if applicable)									
Name (Print/Type)	J. Kenneth Joung	Registration No. Attorney/Agent)	41,881	Telephone	(302)992-4929				
Signature	JI	full-		Date	March 11, 2002				

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$) 1100

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SUBTOTAL (2)

**or number previously paid, if greater, For Reissues, see above

(\$) 0

PTO/SB/92 (08-00)

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09/610,132 **AD 6753 US CIP** Response to Official Action Supplemental Information Disclosure Statement Three Month Extension of Time

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